#### 2002 GIS Survey Results

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# **Project Contributors**

- Jerry Curtis, CDC: Idea, Logistics
- Bob Scott, Michigan CLPPP: Questionnaire Design
- John Braggio, Oklahoma CLPPP: Questionnaire Analysis
- Lead Programs: 35 Submitted Completed Questionnaires

### Questions

- What GIS program(s) have you used (past and current)?
- 2. What have you done, successfully, with SIS in the recent past?
- 3. What are you currently working on with GIS?
- 4. What do you expect to work on in the future?
- 5. What would you like to do with GIS—if you had unlimited resources of time, money, ability, and cooperative partnerships?

# Questionnaire Analysis

- Open-ended format
- Quantify written answers into categories
  - Results reported as totals and percentages
- Additional post-hoc analyses
  - Healthy People 2010 GIS Objective(s) 23-3
  - Geographic polygon resolution, e.g., county, zip code census tract, etc.
  - Novel ways to use GIS in lead surveillance, prevention, sharing of data and maps

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# Advantages and Limitations of Open-Ended Questionnaires

#### Advantages

- Respondent Permitted to Answer Question as Interpreted
- New Ideas
- General Trends
- Factual Basis for Decision Making

#### • Limitations

- Unable to Evaluate Specific Issues
- Post-Hoc Response Categories
- Quantification Bias

Question 1: GIS Programs

#### Past

- ArcView, ArcInfo, ArcMap, N=18, 51%
- MapInfo, N=6, 17%
- Maptitude, N=4, 11%
- None, N=4, 11%Other, N=3, 9%
- Current
  - ArcView, Ardinfo, N=25, 71%
  - Other, N=4, 11%
  - None, N=4, 11%
  - MapInfo, N=1, 3%
  - Maptitude, N=1, 3%

# Question 2: Past GIS Use

- Multiple Goals, N=17, 49%
- Goals Not Reached, N=8, 23%
- Prevalence, N=7, 20%
- Find High Risk Areas, N=2, 6%
- Find High Risk Groups, N=1, 3%

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### Question 3: Current GIS Use

- Update Files, N=8, 23%
- Multiple Projects, N=7, 20%
- Find High Risk Areas, N=6, 17%
- No Project, N=5, 14%
- Other Projects, N=3, 9%
- Make Maps, N=2, 6%
- Find High Risk Groups, N=2, 6%
- Learning GIS, N=2, 6%

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### Question 4: Future GIS Use

- Find High Risk Areas, N=10, 29%
- Multiple Projects, N=7, 20%
- Dissemination, N=6, 17%
- Screening/Surveillance, N=4, 11%
- Prevention, N=3, 9%
- Analytical, N=2, 6%
- None Planned, N=2, 6%
- Find High Risk Groups, N=1, 3%

#### Question 5: Ideal GIS Project

- Analytical, N=13, 37%
- Multiple Projects, N=10, 29%
- Other, N=6, 17%
- Find High Risk Areas, N=2, 6%
- None Planned, N=2, 6%
- Find High Risk Groups, N=1, 3%
- Prevention, N=1, 3%

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#### Healthy People 2010, GIS Objective(s) 23-3

- GIS Use (Past, Current, Future, Ideal), N=30, 86%
  - Geocoding, N=25, 71%
    - Geocoding (Question 2B, Past, CT/BG), N=14, 40%
    - Audience Poll: ~50%
  - Dissemination, N=19, 54%
  - Target Specific Geographic Areas, N=27, 77%
  - Analytical, N=28, 80%
  - Confidentiality, N=3, 9%

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# Novel GIS Use Award

- Patient Confidentiality
  - Hazel Brown, Duval County, Florida
  - Nancy K. Van Voorhis, Virginia
- Historical Analysis of Prevalence and Lead Risk Fastors
  - Martha Low, Minnesota
  - Carol McDonough, Pennsylvania
  - Thomas Plant, Boston
- Environmental Investigations as Map Layer
  - Russell Dynes, Delaware
- ArcIMS Intranet and Internet GIS Sites
- Jason Smith, Missouri
- Spatial Analysis Model for Lead Poisoned Children
  - Ed Norman and Tina Ward, North Carolina

# Conclusions

- Most Lead Programs Are Using (or Will Be Using) GIS In Lead Surveillance and Prevention Activities
  - 2002 GIS Survey, 86% (Past, Current or Future Use)
  - 2001 GIS Survey, 68% (Current Use)
- GIS Assistance Available from CDC

  - Geocoding2000 US Census Files (Lead Risk Variables)
  - GIS Boundary Files
  - GIS Instruction
  - Assistance With Individual Projects
  - Other?
- Role of GIS in Lead Prevention During this Decade?
- Confidentiality?